

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicant** 

: Michaeli, et al.

Serial No.

: 10/759,832

Filed

: January 15, 2004

For

: LIPOSOMAL VACCINE

Examiner

: Unassigned

Group Art Unit

: 1614

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Sir:

This communication is submitted in compliance with 37 C.F.R. §§1.56, 1.97 and 1.98. Consideration of the documents cited on the attached Form PTO/SB/08A is respectfully requested. Copies of the foreign patent documents and non-patent literature documents are provided herewith.

Serial No. 10/759, 832

Filed: January 15, 2004

Docket No. 1102865-0059

Page 2 of 2

TIME OF TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT

This Information Disclosure Statement is being filed under 37 C.F.R. §1.97(b)(3)

believed to be before the mailing date of the first Office Action on the merits, and therefore no

fee should be due. However, if a fee is required, the Commissioner is authorized to charge such

fee to Deposit Account No. 23-1703.

Dated: <u>July 2, 2004</u>

Respectfully submitted,

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Reg. No. 36,995

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Customer No. 007470

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PTO/SB/08A (08-03)

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Substitute to form 1449/PTO

Sheet

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary) of

Com	Complete if Known				
Application Number	10/613,377				
Filing Date	July 3, 2003				
First Named Inventor	Michaeli, et al.				
Art Unit	1614				
Examiner Name	ТВА				
Attorney Docket Number	1102865-0059				

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Examiner	Cite	Document Number	Publication Date	Name of Patentee	Pages, Columns, Lines, Whe	
Initials	No.1	Number-Kind Code <sup>2</sup> (If known)	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages/Figures Ap	
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Initials*	No.1	Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages Or Relevant Figures Appear	T <sup>6</sup>
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SUBJACTE For form 1449/PTO Complete if Known 10/613,377 Application Number Filing Date July 3, 2003 INFORMATION DISCLOSURE First Named Inventor Michaeli, et al. STATEMENT BY APPLICANT 1614 Art Unit (Use as many sheets as necessary) **Examiner Name TBA** of 1102865-0059 Sheet Attorney Docket Number

Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	Т
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